🐫 🕍 RT B - FEE(S) TRANSMITTAL



mplete and send

this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or Fax

POSS & RUE-1

18 2008

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance feet will be mailed to the current correspondence address as maintenance feet will be mailed to the current correspondence address as maintenance feet mill be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance feet millions.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)

· 23574

7590

05/11/2005

LAW OFFICE OF ANDREI D POPOVICI 786 LA MESA DRIVE PORTOLA VALLEY, CA 94028-7464

05/19/2005 HABDELR3 00000149 502888 09634131

01 FC:2501 02 FC:8001 700.00 DA

30.00 DA

FILING DATE

FIRST NAMED INVENTOR

ATTORNEY DOCKET NO.

POPOVIC

CONFIRMATION NO.

(Signature

APPLICATION NO. 09/634,131

08/08/2000

Sorin C. Cismas

OUA-102

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Malling or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

4256

TITLE OF INVENTION: AUTOMATIC CODE GENERATION FOR INTEGRATED CIRCUIT DESIGN

	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YEŞ	\$700		\$0	\$700	08/11/2005
EXAMINER WOOD, WILLIAM H		ART UNIT 2193		CLASS-SUBCLASS	1	
				717-106000	•	
1. Change of correspondence address or indication of "FeCFR 1.363). Change of correspondence address (or Change of C Address form PTO/SB/122) attached. Prec Address" indication (or "Fec Address" Indicat PTO/SB/47; Rev 03-02 or more recent) attached. Use Number is required.		Correspondence	(1) the na or agents (2) the na registered 2 registered	ating on the patent front page, I mes of up to 3 registered pate OR, alternatively, me of a single firm (having as attorney or agent) and the nar of patent attorneys or agents. In mame will be printed.	a member a 2	El B. Popovi
(A) NAME OF ASSIGNE	an assignee is identified be 37 CFR 3.11. Completion 2E	elow, no assignee d of this form is NOT (B)	ata will app a substitute RESIDENC	ear on the patent. If an assig for filing an assignment. CE: (CITY and STATE OR CO	UNTRY)	document has been filed for
	n Corporat			ità clara, c		
Please check the appropriate	ussignee category or catego	ries (will not be prin	nted on the p	natent): Dindividual (C	, ,	troup entity 🚨 Government
Please check the appropriate 4a. The following fee(s) are of the following fee(s) are of the feet feet feet feet feet feet feet	ussignee category or catego enclosed;	ries (will not be prin 4b.	nted on the p	natent): Dindividual (C	orporation or other private s	group entity 🚨 Government
Please check the appropriate la. The following fee(s) are o	ussignee category or categorical categor	ries (will not be prin 4b. (xi)	Payment of A check Dayment	eatent): Individual (C) Fec(s): in the amount of the fee(s) is early credit card. Form PTO-203	corporation or other private goodsed. 8 is attached.	r credit any overpayment, to
Picase check the appropriate 4a. The following fee(s) are of the fee fee fee fee fee fee fee fee fee f	ussignce category or category	thes (will not be prin 4b. (xd) (37 CFR 1.27.	Payment of A check The Direction of the	eatent): Individual (C) Fec(a): in the amount of the fee(a) is eably credit card. Form PTO-203 rector is hereby authorized by count Number 10.23	corporation or other private an extraction of colored. Statisched. Charge the required fee(s), or colore an extraction. LL ENTITY status, See 37	or credit any overpayment, to copy of this form). CFR 1.27(g)(2).
Picase check the appropriate 4a. The following fee(s) are of the fee fee fee fee fee fee fee fee fee f	ussignce category or category	thes (will not be prin 4b. (xd) (37 CFR 1.27.	Payment of A check The Direction of the	eatent): Individual (Confection): Individual (Confection): In the amount of the fee(s) is easily credit card. Form PTO-203 actor is hereby authorized by count Number (Confection): In 2 2 3 3	corporation or other private an extraction of colored. Statisched. Charge the required fee(s), or colore an extraction. LL ENTITY status, See 37	or credit any overpayment, to copy of this form). CFR 1.27(g)(2).

submiliting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the property you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1993, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-85 (Rev. 12/04) Approved for use through 04/30/2007.

OMB 0651-0033 U.S. Patent and Trudemark Office; U.S. DEPARTMENT OF COMMERCE